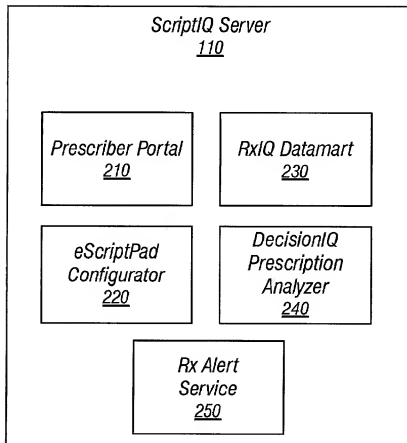


FIG. 1

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**FIG. 2**

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300



**MedClinic**  
MEDICAL GROUP  
HEALTH CARE EXCELLENCE  
WITH COMPASSION

XXXXXX, MD  
XXXXXXXXXX  
XXXXXXXXXX  
XXXXXXXXXX

DEA # XXXXXXXXXXXX  
CA LICENSE #XXXXXXX

PATIENT NAME: \_\_\_\_\_ DATE: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> ADALAT CC 30/ 60 /90<br>MG | <input type="checkbox"/> DYAZIDE                    | <input type="checkbox"/> METFORMIN 500/850<br>MG    |
| <input type="checkbox"/> ALLEGRA 60 MG              | <input type="checkbox"/> ENALAPRIL 5 / 10<br>MG     | <input type="checkbox"/> METOPROLOL 50<br>MG        |
| <input type="checkbox"/> AMOXICILLIN 250/500<br>MG  | <input type="checkbox"/> FUROSEMIDE 20 / 40<br>MG   | <input type="checkbox"/> NAPROXEN 375 / 500<br>MG   |
| <input type="checkbox"/> ATENOLOL 50 MG             | <input type="checkbox"/> IBUPROFEN 600 / 800<br>MG  | <input type="checkbox"/> NASACORT AQ                |
| <input type="checkbox"/> CAPTOPRIL 12.5 / 25<br>MG  | <input type="checkbox"/> KCl 8 / 10 / 20 mEq.       | <input type="checkbox"/> PREMARIN 0.3 / 0.625<br>MG |
| <input type="checkbox"/> CELEXA 20 / 40<br>MG       | <input type="checkbox"/> LIPITOR 10 / 20 / 40<br>MG | <input type="checkbox"/> PREMPRO 0.625 / 2.5<br>MG  |
| <input type="checkbox"/> CEPHALEXIN 250/500         | <input type="checkbox"/> LOTENSIN 10 / 20 / 40      | <input type="checkbox"/> RANITIDINE 150/300         |
| <input type="checkbox"/> OTHER _____                |   |   |

SIG \_\_\_\_\_

QD BID TID QID PRN QTY: \_\_\_\_\_ REFILL X \_\_\_\_\_  
☐ DAW

- ☐ SPECIAL INSTRUCTIONS ON BACK OF PRESCRIPTION

PROVIDER SIGNATURE \_\_\_\_\_

FILL WITH GENERIC DRUG UNLESS OTHERWISE STATED. ONLY ONE  
MEDICATION PER PRESCRIPTION.

FIG. 3

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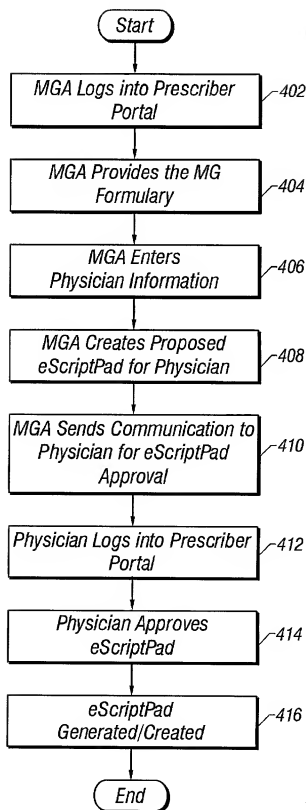


FIG. 4

<b>Oral Contraceptives</b>	<b>Cost</b> 	<b>HN/F</b>	<b>PC/SH</b>	<b>WHA</b>	<b>Aetna</b>	<b>Cigna</b>	<b>BC</b>	<b>BS</b>
Necon, Norinyl, Norethin, Ortho Novum, \$11-27 Genora--1/50 (generics)		X	X	X	X	X	X	X
Necon, Norinyl, Norethin, Ortho Novum, \$11-27 Genora, Jenest, Nelova--1/35 (generics)		X	X	X	X	X	X	X
Modicon, Genora, Necon, Nelova, Brevicon--0.5/35	\$20	X	X		X	X	X	X
Ovrette	\$25	X		X	X			X
Desogen, Ortho-Cept	\$27	X	X	X	X	X	X	X
Estrostep	\$27	X			X			
Tri-Norinyl	\$28	X	X	X		X	X	X
Triphasil, Tri-Levien	\$29	X	X	X	X	X	X	X
Mircette	\$30	X	X				X	
Nordette, Levlen, Levora	\$30	X	X	X	X	X	X	X
Lo-Ovral	\$31	X	X	X	X	X	X	X
Ortho Cyclen	\$31	X		X	X		X	
Ortho-Tri-Cyclen	\$31	X		X	X		X	
Ortho Novum 777	\$31	X		X	X	X	X	
Demulen, Zovia--1/35, 1/50	\$31-35	X	X	X		X	X	X
Ovcon--35, 50	\$32/35			X		X	X	
Allesse, Levlite	\$32	X	X	X	X	X	X	X
Loestrin, Loestrin Fe 1/20, 1.5/3.0	\$33	X		X	X	X	X	X
Ortho Novum, Necon--10/11	\$34	X			X	X	X	
Micronor, Nor-Q-D	\$35	X	X	X	X	X	X	X
Ovral	\$50	X	X		X	X	X	

FIG. 5A

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<b>Hormone Replacement Therapy</b>	<b>Cost</b> Y	<b>HN/F</b>	<b>PC/SH</b>	<b>WHA</b>	<b>Aetna</b>	<b>Cigna</b>	<b>BC</b>	<b>BS</b>
Provera, Cycrin (generic) 5mg	\$5	X	X	X	X	X	X	X
Estrace (generic)	\$6	X	X	X	X	X	X	X
Estopipate-Ogin (generic) 0.625mg	\$6	X	X	X	X	X	X	X
Menest 0.625mg	\$7	X	X			X	X	X
Cenestin 0.625mg	\$18							
Estratab 0.625mg	\$19	X	X		X	X	X	
Premarin 0.625mg	\$21	X	X	X	X	X	X	X
Prempro 0.625mg/2.5mg	\$31	X	X	X	X	X	X	X
FemHRT	\$25							
Ortho-Prefest	\$25						X	
Activella	\$26							X
Climara 0.05mg/24 hrs (4 patches/mo)	\$27	X				X	X	X
Vivelle 0.05mg/24 hrs (8 patches/mo)	\$28		X	X	X	X	X	X
Estraderm 0.05mg/24 hrs (8 patches/mo)	\$28	X	X	X	X	X	X	
Estratest 2.5mg/1.25, Estratest HS	\$40/32	X	X	X	X	X	X	X

<b>Antihistamines</b>	<b>Cost</b> Y	<b>HN/F</b>	<b>PC/SH</b>	<b>WHA</b>	<b>Aetna</b>	<b>Cigna</b>	<b>BC</b>	<b>BS</b>
Fexofenadine (Allegra) 60mg BID prn	\$42	X	X	X		X	X	X
Cetirizine (Zyrtec) 10mg qd	\$49	X*		X*	X		X	
Azelastine (Astellin) Nasal Spray 2 sprays each nostril BID prn	\$50	X	X		X		X	
Loratadine (Claritin) 10mg qd	\$61	X	X		X	X	X	X

\*Zyrtec syrup is covered for children <12

FIG. 5B

<b>Antidepressants</b>	<b>Cost</b>	<b>HN/F</b>	<b>PC/SH</b>	<b>WHA</b>	<b>Aetna</b>	<b>Cigna</b>	<b>BC</b>	<b>BS</b>
<i>Amitriptyline (generic)</i>	\$4	X	X	X	X	X	X	X
<i>Trazodone (generic)</i>	\$5	X	X	X	X	X	X	X
<i>Nortriptyline (generic)</i>	\$6	X	X	X	X	X	X	X
<i>Imipramine (generic)</i>	\$9	X	X	X	X	X	X	X
<i>Desipramine (generic)</i>	\$9	X	X	X	X	X	X	X
<i>Citalopram (Celexa)</i>	\$51	X	X	X			X	X
<i>Paroxetine (Paxil)</i>	\$63	X	X	X	X	X	X	X
<i>Sertraline (Zoloft)</i>	\$63	X		X	X	X	X	X
<i>Nefazodone (Serzone)</i>	\$65	X	X	X	X	X	X	X
<i>Venlafaxine (Effexor XR)</i>	\$73	X	X	X	X		X	
<i>Bupropion (Wellbutrin SR)</i>	\$75	X		X	X		X	X
<i>Mirtazapine (Remeron)</i>	\$76	X		X	X		X	X
<i>Fluoxetine (Prozac)</i>	\$108	p		X*	X	X	X	X

\*PA if higher dose

**FIG. 5C**

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<b>Antibiotics - Adults</b>	<b>Cost</b>	<b>HN/F</b>	<b>PC/SH</b>	<b>WHA</b>	<b>Aetna</b>	<b>Cigna</b>	<b>BC</b>	<b>BS</b>
Penicillin	\$3	X	X	X	X	X	X	X
TMP/SMX	\$3	X	X	X	X	X	X	X
Doxycycline	\$3	X	X	X	X	X	X	X
Metronidazole	\$3	X	X	X	X	X	X	X
Tetracycline	\$4	X	X	X	X	X	X	X
Amoxicillin	\$4	X	X	X	X	X	X	X
Cephalexin	\$5	X	X	X	X	X	X	X
Erythromycin	\$6	X	X	X	X	X	X	X
Sulfa/Erythro	\$8	X	X	X	X	X	X	X
Dicloxacillin	\$9	X	X	X	X	X	X	X
Nitrofurantoin	\$12	X	X	X	X	X	X	X
Clindamycin	\$21	X	X	X	X	X	X	X
Cefaclor (generic)	\$25	X	X	X	X	X	X	X
Azithromycin (Zithromax)	\$35	X	X	X		X	X	X
Clarithromycin (Biaxin)	\$55	X	X		X	X	X	X
Cefprozil (Cefzil) peds pricing	\$60	X	X	X		X	X	X
Gatifloxacin (Tequin)	\$53	X	X*					
Levofloxacin (Levaquin)	\$60			X	X		X	
Moxifloxacin (Avelox)	\$61							
Ciprofloxacin (Cipro)	\$63	X	X	X	X	X	X	X
Amoxicillin/Clavulanate (Augmentin) peds-\$65	\$80	X	X	X	X	X	X	X
Cefuroxime (Ceftin)	\$85	X	X		X	X	X	X

\* > 65 years old w/CAP (community acquired pneumonia)

FIG. 5D



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<b>Nsaids</b>	<b>Cost</b> Y Y	<b>HN/F</b>	<b>PC/SH</b>	<b>WHA</b>	<b>Aetna</b>	<b>Cigna</b>	<b>BC</b>	<b>BS</b>
<i>Indomethacin (generic) 25mg tid</i>	\$4	X	X	X	X	X	X	X
<i>Ibuprofen (generic) 600mg tid</i>	\$4	X	X	X	X	X	X	X
<i>Piroxicam (generic) 10mg bid</i>	\$4	X	X		X	X	X	X
<i>Naproxen (generic) 500mg bid</i>	\$7	X	X	X	X	X	X	X
<i>Salsalate (generic) 750mg ii bid</i>	\$8	X	X	X	X	X	X	X
<i>Ketoprofen (generic) 75mg tid</i>	\$10	X	X	X	X	X	X	X
<i>Etodolac-Lodine (generic) 400mg bid</i>	\$24		X		X	X	X	X
<i>Diclofenac-Na-Voltaren (generic) 50mg tid</i>	\$27	X	X	X	X	X		X
<i>Diclofenac-K (generic) 50mg tid</i>	\$36	X				X		X
<i>Tolmetin (generic) 400mg bid</i>	\$37	X	X		X	X	X	
<i>Meloxicam (Mobic) 15mg qd</i>	\$65							
<i>Refecoxib (Vioxx) 25mg qd</i>	\$76	p		p	p		p	
<i>Celecoxib (Celebrex) 200mg qd</i>	\$76	p			p		p	
<i>Nabumetone (Relafen) 500mg ii qd</i>	\$82							
<i>Oxyprozin (Daypro) 600mg ii qd</i>	\$101							
<i>Celecoxib (Celebrex) 200mg bid</i>	\$151	p			p		p	

Green- Best Practice Preferred Choice

Black- No Specific Recommendation

Pink- Prior Auth., or step therapy, or has quantity or age limits

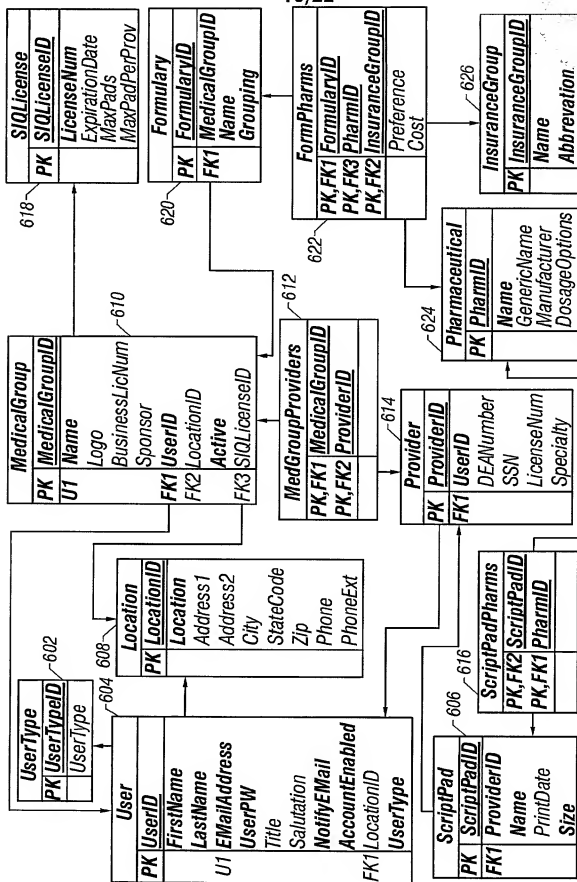
Y - Utilization Pricing

Y Y - AWP Pricing

### XYZ MEDICAL GROUP


Formulary  
Selection  
Guide

FIG. 5E



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**SCRIPT iQ**  
INTELLIGENT PRESCRIBING SOLUTIONS

Welcome Dr. John Doe

Personal Profile (Physician)

My eScript Pads

My Account

Account History

Order eScript Pads

**Personal Information**

Subscriber ID Type:  ID #:

Salutation:  First Name:  Last Name:  Suffix:

Specialty:  Title:  (DO, MD, Etc.)

**Sponsor Group/Practice Information**

Type:  Sponsorship Code:

Name:

Practice Specialty:

Address / Shipping Information

Address Type:

Street Address:

Dept./Suite/Etc:

City:  State:  Zip/Postal Code:

Shipping Contact:

Phone:

Fax:

FIG. 7



INTELLIGENT PRESCRIBING SOLUTIONS

*Welcome Dr. John Doe*

### Modify Medications

*My eScript Pads*

## My Account

Account History

*Order eScript Pads*

*Editing: Standard Pad*

Choose from the following medications

*Medications selected for your eScriptPad*

Add

move

*The ability to remove medications from the ad can be limited by the sponsoring group or medical group*

*Available medications may be limited based upon the list of medications approved by the physician's sponsoring group or medical group*

Preview

Update

**FIG. 8**

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**SCRIPT**  
INTELLIGENT PRESCRIBING SOLUTIONS  
Welcome Dr. John Doe

eScriptPad Preview

900

**Preview: Standard Pad**

My eScript Pads  
My Account  
Account History  
Order eScript Pads  
Formulary Changes  
Product Notices  
Reporting  
Order Rx Supplies  
Rx Alerts

**MedClinic**  
MEDICAL CENTER  
HEALTH CARE PROVIDER  
NORTH CAROLINA

XXXXXX, MD  
XXXXXXXXXX  
XXXXXXXXXX  
XXXXXXXXXX

DEA # XXXXXXXXXX  
CA LICENSE #XXXXXX

**Order this eScriptPad**

PATIENT NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

<input type="checkbox"/> ADALATCC 30/60/90 MG	<input type="checkbox"/> DIAZIDE	<input type="checkbox"/> METFORMIN 500/850 MG
<input type="checkbox"/> ALLEGRA 60 MG	<input type="checkbox"/> ENULAPRIL 5/10 MG	<input type="checkbox"/> METOPROLOL 50 MG
<input type="checkbox"/> AMOXICILLIN 250/500 MG	<input type="checkbox"/> FUROSEMIDE 20/40 MG	<input type="checkbox"/> NAPROXEN 375/500 MG
<input type="checkbox"/> ATENOLOL 50 MG	<input type="checkbox"/> IBUPROFEN	<input type="checkbox"/> NASACORT AQ
<input type="checkbox"/> CAPTOPRIL 12.5/25 MG	<input type="checkbox"/> KCI 8/10/20 mEq	<input type="checkbox"/> PREMARIN 0.3/0.625 MG
<input type="checkbox"/> CELEBA 20/40	<input type="checkbox"/> LIFTOR 10/20/40	<input type="checkbox"/> PREMPRO 0.625/2.5 MG
<input type="checkbox"/> CEPHALEXIN 250/500	<input type="checkbox"/> LOTENSIN 10/20/40	<input type="checkbox"/> RANITIDINE 150/300
<input type="checkbox"/> DILACOR XR 180/240MG	<input type="checkbox"/> MAXIDE 25 MG	<input type="checkbox"/> RHINOCORT AER
<input type="checkbox"/> OTHER _____		

SIG \_\_\_\_\_  
QD BID TID QID PRN QTY \_\_\_\_\_ REFILL X \_\_\_\_\_  
☐ DAW  
☐ SPECIAL INSTRUCTIONS ON BACK OF PRESCRIPTION  
PROVIDER SIGNATURE \_\_\_\_\_  
FILL WITH GENERIC DRUG UNLESS OTHERWISE STATED. ONLY ONE  
MEDICATION PER PRESCRIPTION.

FIG. 9



1100

**FIG. 11**

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To: Medical Group User  
From: eScriptIQ System Alert Service  
Date: November 1, 2001  
Subject: ALERT - Changes to eScriptPad Prescription Pads

Dear Medical Group User,

We have noted that you have changed the formulary for your medical group. The eScriptPad prescription pads for the following doctors are affected and should be changed:

Dr. John Doe     [john DOE@scriptiq.com](mailto:john DOE@scriptiq.com)  
Dr. Mary Smith   [marysmith@scriptiq.com](mailto:marysmith@scriptiq.com)  
Dr. Jack Jones    [jack.jones@scriptiq.com](mailto:jack.jones@scriptiq.com)

You can revise their prescription pads by clicking on this link: <http://www.ScriptIQ.com/login.html>.

Sincerely,  
ScriptIQ Alert Administrator

FIG. 12



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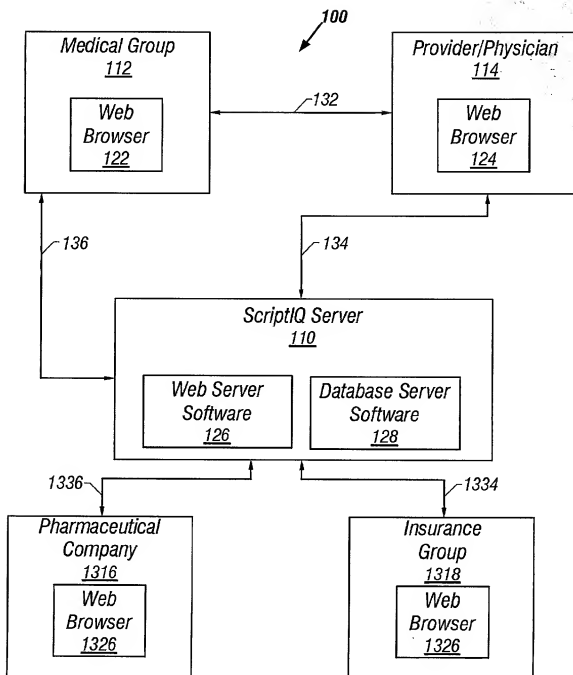


FIG. 13

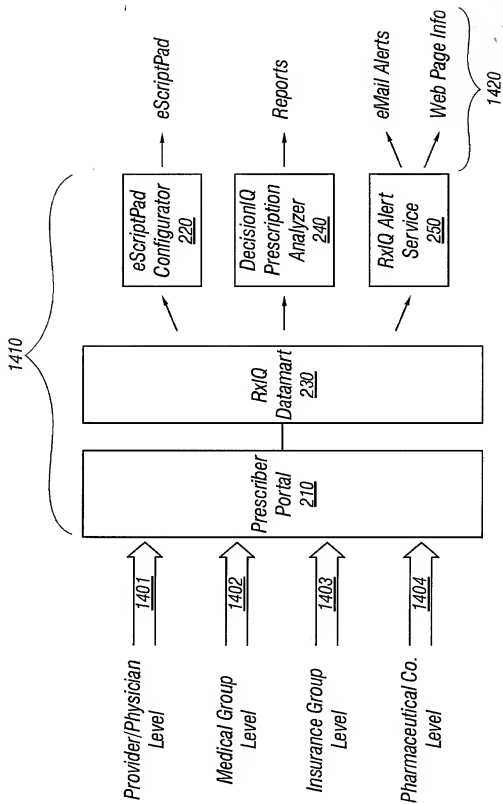
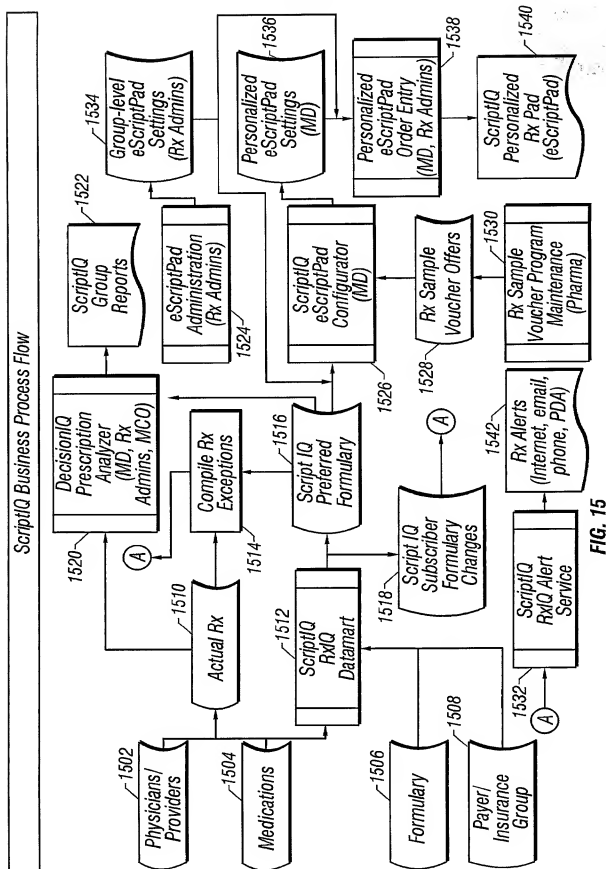


FIG. 14



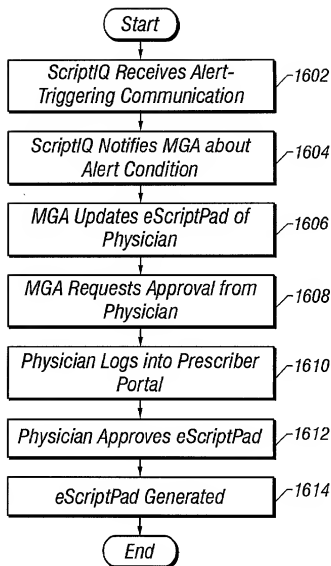


FIG. 16

To: Medical Group User  
From: eScriptIQ System Alert Service  
Date: November 1, 2001  
Subject: ALERT - Changes to eScriptPad Prescription Pads

Dear Medical Group User,

We have received a communication from ABC Pharmaceutical Company stating that pharmaceutical product 123AB has been recalled. Please see <http://www.ScriptIQ.com/RxAlertService/Alert1987.html> for any additional information.

The eScriptPad prescription pads for the following doctors are affected and should be changed:

Dr. John Doe [john DOE@scriptiq.com](mailto:john DOE@scriptiq.com)  
Dr. Mary Smith [marysmith@scriptiq.com](mailto:marysmith@scriptiq.com)  
Dr. Jack Jones [jack.jones@scriptiq.com](mailto:jack.jones@scriptiq.com)

You can revise their prescription pads by clicking on this link: <http://www.ScriptIQ.com/login.html>.

Sincerely,  
ScriptIQ Alert Administrator

FIG. 17

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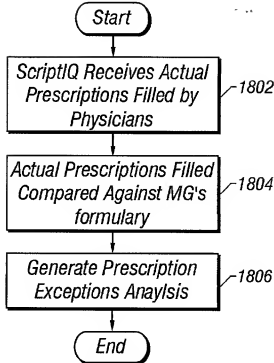


FIG. 18

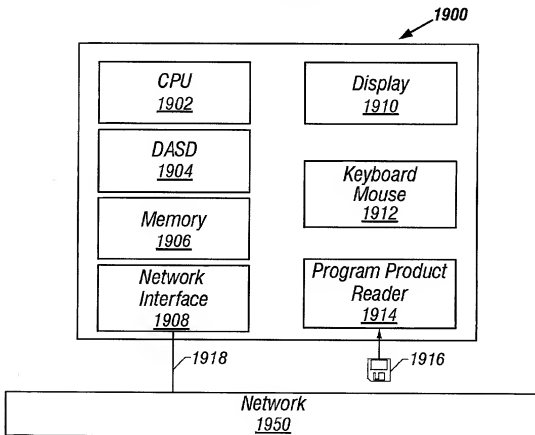


FIG. 19